# OFFICIAL FILE ILLINOIS COMMERCE COMMENT

## ORIGINAL

(File this application via e-docket, or if unable to do so, file one original verified application with the Chief Clerk.)

Docket No. ICC Office Use Only

Please provide the appropriate information in the ( ) areas in the heading below.

FreedomStarr Communications Inc.

Application for a certificate of prepaid calling service provider authority in the State of Illinois.

05-0412

### APPLICATION TO OBTAIN A "CERTIFICATE OF PREPAID CALLING SERVICE PROVIDER AUTHORITY"

(Use additional sheets as necessary.)

#### GENERAL

1. Applicant's Name (including d/b/a, if any)

FEIN # 33-0739131

FreedomStarr Communications Inc. d/b/a AmericanFone

6300 Wilshire Blvd., Suite710

Los Angeles, CA, 90048

Please complete the following with respect to the Applicant and Underlying Carrier:

2. Please provide the Applicant's toll-free customer service number.

800-741-0744

3. In what area or areas of the state does the Applicant propose to provide service?

Entire state of Illinois as needed

- 4. Please attach a sheet designating contact persons to work with Illinois Commerce Commission Staff on the following:
  - a) issues related to processing this application:
  - b) consumer issues
  - c) customer service complaint resolution
  - d) technical and service quality issues and compliance with service quality standards and remedies
  - e) "tariff" and pricing issues
  - f) security/law enforcement

Please identify each contact person's (i) name, (ii) title, (iii) mailing address, (iv) telephone number, (v) facsimile number, and (vi) e-mail address.

J.	Please check type of organization.				
	Individual	X Corporation			
	Partnership	Date corporation was formed January 7, 1997			
		In what state? <u>California</u>			
	Other (Specify)				
6.	Submit a copy of articles of incorpora underlying carrier(s) and a copy of ce	ntion or other organization documents, a copy of any contract with any ortificate of authority to transact business in Illinois.			
7.	List jurisdictions (other than Illinois) in which Applicant is offering service(s).				
	All states				
8.	Has the Applicant, or any principal in revoked or suspended in any jurisdict	Applicant, been denied a Certificate of Service or had its certification ion in this or another name?			
	YES (Please provide details)	X NO – Application was withdrawn			
9.	Have there been any complaints or judg	gments levied against the Applicant in any other jurisdiction?			
	YESX_NO				
		<u> </u>			
10.	Has Applicant provided service under	r any other name?			
	X YESNO				
	If YES, please list. AmericanFone,	Planet Earth Communications, iPhoneBill.com			
11	Is the Applicant seeking an expedited	application pursuant to Section 13-404.1(b)?			
	YESX_NO				
	If YES, please provide the name of the certification proceeding.	ne underlying carrier(s) and the docket number of the underlying carrier(s)			

12. Please attach evidence of the applicant's managerial and technical resources and ability to provide service. This

may be in narrative form, resumes of key personnel, or a combination of these forms.

13.	List officers or principals of Applicant.
	Gary H. Hickox, CEO/Treasurer  Mark A. Cohen, President  Miles Archer Woodlief, Secretary
14.	Does any officer or principals of Applicant have an ownership or other interest in any other entity, which has provided or is currently providing telecommunications services? YESX_ NO
	If YES, list entity.
15.	How does Applicant propose to handle service complaints? (At a minimum, describe Applicant's internal process for complaint resolution, the complaint escalation process, the timeframe and process by which the customer is notified by Applicant that they may seek assistance from the Commission?)
	When a service complaint is received by phone or email, the advocate responds immediately to resolve the issue.
	If the customer is unsatisfied with the resolution, then the issue is escalated to the Care Manager, who will reply
	within two business days to the customer, in reciprocal form to which it was received or as requested by the
	customer. If the customer remains unsatisfied with the resolution, the issue is escalated to the President who will
	reply within two business days to the customer, in reciprocal form to which it was received or as requested by
	the customer.
16.	Does Applicant currently maintain service quality standards?
	X YES NO
	If YES, please attach what those standards are, any credits that may be issued for failures and how customers are notified.
17.	Will personnel be available at Applicant's business office during regular working hours to respond to customer inquiries about service or billing?X YES NO
18.	What telephone number(s) would a customer use to contact your company (other than the toll-free customer service number provided in response to question 1)?
	323-801-0250
19.	Is Applicant aware that it must file tariffs prior to providing service in Illinois?
	X_YESNO
EIN	
20.	Please attach evidence of Applicant's financial fitness through the submission of its most current income statement and balance sheet, or other appropriate documentation of applicant's financial resources and ability to provide service.

TECHNICAL SECTION OF THE PARTY OF THE PARTY

	If NO, which underlying carrier's facilities does the Applicant intend to use?
	Global Phone
2.	Please describe the nature of prepaid service to be provided (e.g., general service, location specific service, discounted rates for specific countries, etc.).
	See attached
ί.	Will technical personnel be available at all times to assist customers with service problems?
	YESX_NO
١.	Please attach a copy of the front and back of any prepaid calling cards Applicant currently sells.
	Signature of Applicant)
٠	(Simple of Ambient)

#### VERIFICATION

This application shall be verified under oath.

#### OATH

State of
County of Los Angeles )ss
Gary H. Hickox makes oath and says that he is <u>CEO</u> (Insert here the name of affiant) (Insert the official title of the affiant)
of FreedomStarr Communications Inc.  (Insert here the exact legal title or name of the Applicant)
that he has examined the foregoing application and that to the best of his knowledge, information, and belief, all statements of fact contained in the said application are true, and the said application is a correct statement of the business and affairs of the above-named applicant in respect to each and every matter set forth therein.    Jay 1
Subscribed and sworn to before me, a Notary Public/ Meagan L. Cantrell  Title of person authorized to administer oaths)  in the State and County above named, this 27 day of June, 2005.
Heagan J. (antit) (Signature of person authorized to administer oath)



#### **Attachments**

#### **Question number:**

- 4. Contact information
- 6. Copy of:
   articles of incorporation
   contract with underlying carrier
   certificate of authority to transact business in Illinois
- 12. Managerial and technical resources and ability to provide service
- 16. Service quality standards
- 20. Financials
- 22. Description of nature of prepaid service
- 24. Sample prepaid calling cards